Section C:
To be completed by <b>student.</b>
Student's name, as it appears on their SS card:
Last
First M.I
2. Student's date of birth:
Month Day Year
Student's permanent mailing address:
Street Number
Street Name, Including Apt. #
<del>                                     </del>
City
State Zip Code
4. What is your expected credential date?
5. <b>Student Certification:</b> The information provided in
Sections B and C of this form are true and complete to
the best of my knowledge. I have read the instructions
accompanying this form and the attached information. I
understand that this GPA verification is used to determine
my eligibility for the Cal Grant T Program and will include
bnly undergraduate course work completed through the
Fall 1999 term. I further understand that it is illegal to report false or misleading information on this document. I
further understand that without a valid social security
number recorded on the other side, this form will not be
considered a valid document.
Student's Signature
Date



Mail using the enclosed envelope to:

California Student Aid Commission Grant Programs Processing Section

Attn: Cal Grant T P.O. Box 419028

Rancho Cordova, CA 95741-9028